

CALL TO ORDER

The meeting was called to order at 5:30 pm by Robert Sharp, District Board Chair.

PRESENT

Robert Sharp, Chair
Jody Veenker, Vice Chair
Mary Mae Kilpatrick, Secretary
Topah Spoonhunter, Treasurer
Jean Turner, Member-at-Large
Kelli Davis MBA, Interim Chief Executive Officer and Chief Operating Officer
Vinay Behl, Interim Chief Financial Officer
Joy Engblade MD, Chief Medical Officer
Allison Partridge RN, MSN, Chief Nursing Officer
Sierra Bourne MD, Chief of Staff
Keith Collins, General Legal Counsel (Jones & Mayer)

OPPORTUNITY FOR PUBLIC COMMENT

Mr. Sharp announced that the purpose of public comment is to allow members of the public to address the Board of Directors. Public comments shall be received at the beginning of the meeting and are limited to three (3) minutes per speaker, with a total time limit of thirty (30) minutes being allowed for all public comment unless otherwise modified by the Chair. Speaking time may not be granted and/or loaned to another individual for purposes of extending available speaking time unless arrangements have been made in advance for a large group of speakers to have a spokesperson speak on their behalf. Comments must be kept brief and non-repetitive. The general Public Comment portion of the meeting allows the public to address any item within the jurisdiction of the Board of Directors on matters not appearing on the agenda. Public comments on agenda items should be made at the time each item is considered. No comments were heard

NEW BUSINESS

RE- ORDERING OF MEETING AGENDA

Mr. Sharp requested that agenda item 3B, *Chief Executive Officer Search Update (information item)* be re- ordered to become 3A under *New Business* section. The re- ordering of the agenda was requested in order to allow appropriate length of time for Mick Ruel with AMN Healthcare to provide an update on this topic early in the meeting.

CHIEF EXECUTIVE OFFICER SEARCH UPDATE

Mr. Ruel provided an update on the Chief Executive Officer search, he stated they are working with members of the subcommittee to ensure that the best qualified candidate is able to meet the needs and key characteristics identified in the survey taken by members of the district at Northern Inyo Healthcare District. Background checks are being conducted on each qualified candidate. At this moment there are 9

potential candidates, in hopes of having at least 14 candidates available after this week. Mr. Ruel expressed that during the interview process, it is very important that the information regarding the candidate's remain limited and confidential.

Chief Medical Officer, Joy Engblade expressed that it would be beneficial to know information regarding spouse's profession or job search, since the candidate will likely need to relocate and the district can help make smooth transitions. Mr. Ruel stated that candidates are not required to provide information about their spouse/significant other professional positions, however he advised that this concern should be expressed to the candidate in the early stages of the interview process.

Jean Turner, expressed that the information provided by Mr. Ruel and his team has been very thorough and expressed appreciation for the updated report. Topah Spoonhunter also agreed with Ms. Turner.

NORTHERN INYO
HEALTHCARE
DISTRICT 2020
FINACIAL AUDIT
REPORT AND
DOCUMENT
PRESENTATION BY
EIDE BAILEY LLP

Interim Chief Financial Officer, Vinay Behl introduced David Schowalter with Eide Bailly. Mr. Showalter provided a presentation of the 2020 Financial Audit explained that components of the audit scope included NIHD Auxiliary (5/31/2020), Pioneer home health (12/31/20219), NIHD foundation (6/30/2020), and Pioneer Medical Associates (12/31/2019). Mr. Schowalter explained that as they gathered the information needed they came across a few challenges when reviewing open balances, this was due to the data format provided by the Athena Electronic Health Record (EHR) system. The audit report also provided disclosures about CMS, provider refund amounts and proposed adjustments. The audit for the fiscal year ending June 30, 2021 is scheduled to start in August 2021. In addition, he also provided information on the current Governmental Accounting Standards Board Pronouncements and future ones that will soon be implemented. (GASB NO effective after June 30, 2020)

Ms. Turner and Mr. Sharp expressed their appreciation for the detailed report and all the work that went into preparing this audit. Ms. Turner expressed that the audit is an opportunity to streamline and improve areas of growth. No action was taken at this moment.

PHARMACY UPDATE –
COLOMBO
CONTRUCTION

Interim Chief Executive Officer, Kelli Davis introduce Louis Vargas with Colombo Construction. Mr. Vargas provided a presentation on the pharmacy project. He explained that the Infusion area is approximately 2023 SQ. FT and is requesting an expedited review by July 29, 2021 from CALOSHDPD. He stated there will be three locations for the automated dispensary cabinets. Consideration and careful observation to the design of the project were based on the ambient, heat temperature and altitude in the Bishop area.

**CERNER PROJECT
UPDATE**

Daryl Duenkel provided an update on the Cerner Project and stated that weekly calls will cease within next couple of weeks. The Revenue Cycle team will continue to meet every other week in efforts to trouble shoot any issues on claims being generate. Cerner consultants will continue to provide support through first quarter. Since Cerner Go-Live there were 438 support tickets created, 75% have been resolved and closed. At this time the primary focus will be on the financial performance. Mr. Duenkel expressed this will be his last report update to provide to Board of Directors, he took a moment to thank all District Board Members, Executive team and Lynda Vance for all the support and collaboration on this project. Ms. Tuner expressed appreciation to Mr. Duenkel for all of the reports he has provided to the Board of Directors.

**COMPLIANCE
DEPARTMENT
QUARTERLY REPORT**

Compliance Officer, Patty Dickson, asked if any members of the Board of Directors had questions on the Compliance Quarterly Report. No questions were asked.

It was moved by Ms. Turner, seconded by Mr. Sharp, and unanimously passed to approve the Compliance Department Quarterly Report as presented.

**GLOBAL SERVICES BY
HYLAND
PROFESSIONAL
SERVICES PROPOSAL
ATHENA HEALTH'S
HISTORICAL MEDICAL
RECORD UPLOAD**

Information Technology Services Director, Bryan Harper, explained that the patient data that is currently stored in Athenahealth Electronic Health Record (EHR) system is still being referenced, Global Services by Hyland has provided a solution to convert all patient data from Athena and transfer all patient encounter documents into One Content. This patient data will be available to all medical providers in the district.

It was moved by Ms. Veenker, seconded by Mary Mae Kilpatrick, and unanimously passed to approve the Hyland Professional Service Proposal as presented.

**SHASTA NETWORKS
STATEMENT OF
WORK- CONVERSION
OF ATHENA HEALTH'S
PATIENT ENCOUNTERS
TO PDF DOCUMENTS**

Mr. Harper explained that services provided by Shasta Networks can help bridge the gap on the process of migrating patient data from AthenaHealth and be able to complete the process described on item F. Project Management Specialist, Lynda Vance commented that the Shasta Networks team has been very pleasant to work with.

It was moved by Ms. Veenker, seconded by Ms. Kilpatrick, and unanimously passed to approve the Shasta Network Statement as presented.

CHIEF OF STAFF
REPORT

Chief of Staff, Sierra Bourne, MD reported following careful review, consideration, and approval by the appropriate Committees the Medical Executive Committee recommends approval of the following District-Wide Policies and Procedures:

POLICY AND
PROCEDURE
APPROVALS

1. *1. DI Nuclear Medicine Radiopharmacy Policy*
2. *Medical Staff Department Policy – Pediatrics*
3. *New Line of Service Implementation Policy*
4. *Rabies Vaccination Policy*
5. *Tuberculosis Exposure Control Plan*
6. *Basic Principles of Sterilization*
7. *Cleaning Procedures: Specialized Areas: Sterile Processing*
8. *Operating Room Attire*
9. *Operating Room Sanitation*
10. *Postpartum Patient Care in the PACU*
11. *Rotation Procedures for Patient Cubicle Curtains & Shower Curtains*
12. *Sterilization Recall*
13. *Steris V-Pro Low Temperature Sterilizer Program*
14. *Steris Washer Disinfector*
15. *Storage Requirements for Sterile & Clean Items*

It was moved by Ms. Turner, seconded by Mr. Spoonhunter, and unanimously passed to approve all 15 District-Wide Policies and Procedures as presented.

ANNUAL REVIEW OF
CRITICAL INDICATORS

Doctor Bourne additionally reported following careful review, consideration, and approval by the appropriate committees, the Medical Executive Committee recommends approval of the following annual approvals:

1. Inpatient Medicine Critical Indicators 2021
2. Radiology Services Critical Indicators 2021
3. Utilization Review Critical Indicators 2021

It was moved by Ms. Kilpatrick, seconded by Ms. Veenker, and unanimously passed to approve all 3 Annual Review of Critical Indicators as presented.

UPDATE CORE
PRIVILEGE FORMS

Doctor Bourne additionally reported that the Medical Executive Committee recommends approval of the following Department Privilege Forms.

1. Pediatrics
2. Hospitalist

It was moved by Ms. Veenker, seconded by Mr. Spoonhunter, and unanimously passed to approve all Updated Core Privilege Forms as presented.

**MEDICAL EXECUTIVE
COMMITTEE REPORT**

Doctor Bourne, additionally reported that she has been working with the Wellness Committee and learned that the Employee Assistance Program (EAP) is also available for physicians to provide support.

Dr. Bourne thanked Alison Murray and Kelli Davis for allowing this program to be offered to the District.

CONSENT AGENDA

Mr. Sharp called attention to the Consent Agenda for this meeting which contained the following items:

1. Approval of minutes of the June 4, 2021 special meeting
2. Approval of minutes of the June 16, 2021 regular meeting
3. Interim Chief Executive Officer Report
4. Chief Medical Officer Report
5. Chief Nursing Officer Report
6. Financial and Statistical Report as of May 31, 2021

It was moved by Ms. Turner, seconded by Ms. Veenker, and unanimously passed to approve all six Consent Agenda items as presented.

Ms. Turner thanked all of the Executive Chief Officers for their detailed reports and thoroughness.

**BOARD MEMBER
REPORTS**

No Board Member reports were provided at this meeting.

**ADJOURNMENT TO
CLOSED SESSION**

At 7:04 pm Mr. Sharp reported the meeting would adjourn to Closed Session to allow the District Board of Directors to:

- A. Conference with Labor Negotiators, Agency Designated Representative: Irma Rodriguez Moisa; Employee Organization: AFSCME Council 57 (pursuant to Government Code Section 54957.6)
- B. Conference with legal counsel, anticipated litigation. Significant exposure to litigation (pursuant to paragraph (2) of subdivision (d) of Government Code Section 54956.9) seven cases.
- C. Public Employee Performance Evaluation (pursuant to Government Code Section 54957 (b)) title: Interim Chief Executive Officer


RETURN TO OPEN
SESSION AND REPORT
OF ACTION TAKEN

Mr. Sharp additionally noted that it was not anticipated that any action would be reported out following the conclusion of Closed Session.

At 9:35 pm the meeting returned to Open Session. Mr. Sharp reported that the Board took no reportable action.

ADJOURNMENT

The meeting adjourned at 9:35 pm.



Robert Sharp, Chair

Attest:



Mary Mae Kilpatrick, Secretary